# 20-6 · 02 · 10 · 03 · 00046908

FE7AN014

FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER

2016 FEB 10 PM 12: 26

Office Use Only TYPE OR PRINT ▼ NAME OF Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. IR I, N P A C (RESTORE INGETRITY NOW) 1140 5TH AVENUE S ADDRESS (number and street) Check if different than previously MONDS 198020 reported. (ACC) FEC IDENTIFICATION NUMBER ▼ CITY A STATE A ZIP CODE A 3. IS THIS **AMENDED** 00577684 XX OR REPORT (N) (A) TYPE OF REPORT (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Mar 20 (M3) Dec 20 (M12) Jun 20 (M6) Sep 20 (M9) (Non-Electi Year Only) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report (Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report (Q2) Report for the: Convention (12C) Special (12S) October 15 Quarterly Report (Q3) in the January 31 Election on State of Year-End Report (YE) July 31 Mid-Year (d) 30-Day Report (Non-election **POST-Election** General (30G) Runoff (30R) Special (30S) Year Only) (MY) Report for the: Termination Report (TER) in the Election on State of Covering Period through I certify that I have examined this Report and jo the best of my knowledge and belief it is true, correct and complete. JOHŇ *W*ILLÉSVIK Type or Print Name of Treasurer Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109. Office FEC FORM 3X Use Rev. 12/2004 Only

# 20-16 - 02 - 10 - 0M - 00049904

## SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee Name		
Report Covering the Period: From:	05 (11) (2015) <sub>то</sub>	061/301/2015
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2015		
(b) Cash on Hand at Beginning of Reporting Period	0.00	
(c) Total Receipts (from Line 19)	0.0.0	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	0.00	
7. Total Disbursements (from Line 31)	0.00	and the control of th
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	0.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
Debts and Obligations Owed BY     the Committee (Itemize all on     Schedule C and/or Schedule D)	0.00	
This committee has qualified as a mul	ticandidate committee. (see FEC FORM 1M)	
	For further information contact:	
	Federal Election Commission 999 E Street, NW Washington, DC 20463	·

Toll Free 800-424-9530 Local 202-694-1100

# 2046 - 02 - 10 - 0M - 00049900

### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From:		
	(a) Individuals/Persons Other		
	Than Political Committees	0.00	
	(i) Itemized (use Schedule A)		
	(ii) Unitemized	0.00	
	(iii) TOTAL (add		
	Lines 11(a)(i) and (ii)▶	0.00	
	.,,,		
	(b) Political Party Committees	0.00	
	(c) Other Political Committees	0.00	
	(such as PACs)	0.00	Land Sandard 22 at the stand 2 has been to be the
	(d) Total Contributions (add Lines		
	11(a)(iii), (b), and (c)) (Carry  Totals to Line 33, page 5)  ▶	0.00	
2.	Transfers From Affiliated/Other		
	Party Committees	0.00	
	·		and the contract that the contract of the cont
3.	All Loans Received	0.00	The section of the se
		and the second of the second o	
4.	Loan Repayments Received	0.00	
5.	Offsets To Operating Expenditures	KARONI YONG TANDAR MARINTAN MENERALAH SERTEMBARAN SERTEMBAR	and the second s
	(Refunds, Rebates, etc.)	A COLO	
6	(Carry Totals to Line 37, page 5)	0.00	
О.	to Federal Candidates and Other		
	Political Committees	0.00	
7.	Other Federal Receipts		
	(Dividends, Interest, etc.)	0.00	
8.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account		
	(from Schedule H3)	0.00	San San Con Control of Dan Con Con Control
		La est entimissi unime l'embronhe est ensimple est	
	(b) Levin Funds (from Schedule H5)	0.00	
	(c) Total Transfers (add 18(a) and 18(b))		
	(c) Total Transiers (add Tota) and Total)	L	and the State of t
9.	Total Receipts (add Lines 11(d),		
	12, 13, 14, 15, 16, 17, and 18(c))▶	0.00	
0.	Total Federal Receipts		
	(subtract Line 18(c) from Line 19)▶	0.00	

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal	Total Tills Feriod	Caleffual feat-to-Date
	Activity (from Schedule H4)	0.0.0	
	(i) Federal Share		
	(ii) Non-Federal Share	000	
	(b) Other Federal Operating  Expenditures	0.00	
	(c) Total Operating Expenditures		
22.	(add 21(a)(i), (a)(ii), and (b))▶  Transfers to Affiliated/Other Party	0.00	
	Committees	0.0.0	
23.	Contributions to Federal Candidates/Committees and Other Political Committees	0.0.0	
24.	Independent Expenditures		
25.	(use Schedule E)	0.00	
	(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	
26.	Loan Repayments Made	0.00	A 453 A 4 455 B F 453 F
27.	Loans Made	0.00	
28.	Loans Made Refunds of Contributions To: (a) Individuals/Persons Other		
	Than Political Committees	000	
	(b) Political Party Committees	0.00	
	(c) Other Political Committees (such as PACs)	0.00	
	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶	0.00	
	(235 25 25(2)) (6), 2 (6),		
29.	Other Disbursements	0.0.0	
30.	Federal Election Activity (52 U.S.C. § 30101(2	0))	
	(a) Allocated Federal Election Activity (from Schedule H6)		
	(i) Federal Share	0.00	A 7 534 X 11 434 A 453 R
	(ii) "Levin" Share	0.00	
	(b) Federal Election Activity Paid Entirely		
	With Federal Funds(c) Total Federal Election Activity (add	000	
	Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	* * * * * * * * * * * * * * * * * * *
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	0.00	
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	h h h	
	from Line 31)▶	0.00	

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5 III. Net Contributions/Operating Ex-COLUMN A COLUMN B penditures **Total This Period** Calendar Year-to-Date 33. Total Contributions (other than loans) (from Line 11(d), page 3) ..... 34. Total Contribution Refunds (from Line 28(d)) ..... 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) ..... 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .......▶ 37. Offsets to Operating Expenditures (from Line 15, page 3)..... 38. Net Operating Expenditures (subtract Line 37 from Line 36) ......

## SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: PAGE OF (check only one)			
			11a	y one) ∫ 11b	]11c	12	
	<del></del>			13	14	15	16 17
	y information copied from such Reports and Statem for commercial purposes, other than using the nam						
$\overline{}$	NAME OF COMMITTEE (In Full)				· -		
Α.	Full Name (Last, First, Middle Initial)			Date of	Receipt		
	Mailing Address			_	/ 0 F 0	7	J-7- J-7-1
	City	State	Zip Code	Amount	t of Each Re	eceipt this P	eriod
	FEC ID number of contributing federal political committee.					des (Les Jac	
	Name of Employer Occ	cupation	, , , , , , , , , , , , , , , , , , , ,				
	Primary General	Yayar iya s	Year-to-Date ▼	i;			
— В.	Full Name (Last, First, Middle Initial)		<del></del>	Date of	Receipt		<del></del>
	Mailing Address	Address State Zip Code			M-M / D-D / PY-V-V-V		
	City				t of Each Re	eceipt this P	eriod
	FEC ID number of contributing federal political committee.			1 4	nathutun		9
	Name of Employer Occ	cupation					
	Primary General Other (specify)	ingrae.	Year-to-Date ▼				
c.	Full Name (Last, First, Middle Initial)			Date of	Receipt		
	Mailing Address			TA-TH	/ 0 0	7 / 17 - 7	<b>₹</b>
	City	State	Zip Code	Amoun	t of Each Re	eceipt this P	eriod
	FEC ID number of contributing federal political committee.			[			
	Name of Employer Oct	cupation					
	Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼				
s	UBTOTAL of Receipts This Page (optional)				Sand N. Kilon		
T	OTAL This Period (last page this line number only).					جان (دانونستان جان دانونستان دان	

ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE NUMBER: PAGE OF (check only one)
	for each category of the Detailed Summary Page	21b 22 23 24 25 27 28a 28b 28c 29
Any information copied from such Reports and State	ments may not be sold or used	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	and accorded or any pointed	
	N	1 /
Full Name (Last, First, Middle Initial)		
Α.	1	Date of Disbursement
Mailing Address		
City	State Zip Code	
Purpose of Disbursement	7	Amount of Each Disbursement this Perio
Candidate Name		Category/ Type
<u> </u>	ment For:	Type
Senate President	Primary ☐ General Other (specify) ▼	
State: District:	·	
Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement
Mailing Address		
City	State Zip Code	
Purpose of Disbursement	£=	man Tanana
Candidate Name	l	Amount of Each Disbursement this Perio Category/ Type
Office Sought: House Disburse Senate President	ment For:  Primary General  Other (specify)	
State: District:		
Full Name (Last, First, Middle Initial)  C.		Date of Dishusers
<b>.</b>		Date of Disbursement
Mailing Address		
City		
Purpose of Disbursement	Amount of Each Disbursement this Perio	
Candidate Name	Category/ Type	
Office Sought: House Disburse Senate President	ment For:  Primary General  Other (specify)	- 1957 - Linear Character
State: District:	· · ·	
SUBTOTAL of Disbursements This Page (optional).		
TOTAL This Period (last page this line number only	'J	

SCHEDULE C (FEC Form 3X)	
LOANS	Use separate schedule(s) PAGE OF
	for each category of the Detailed Summary Page FOR LINE 13 OF FORM 3X
NAME OF COMMITTEE (In Full)	<del></del>
_	
LOAN SOURCE Full Name (Last, First, Middle Initia)	Election:
	Primary
	General Other (coecify)
Mailing Address	Other (specify) ▼
City State	ZIP Code
	ive Payment To Date Balance Outstanding at Close of This Period
ر من المسلم الم	
TERMS	
Date Incurred  (MAS ME) / SOFTOT / PYTON PYTON PARTY / SMARTHER /	Date Due Interest Rate Secured:
The second second second	% (apr) Yes No
List All Endorsers or Guarantors (if any) to Loan So	
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
Walling Addition	Coopanon
	Amount
City State ZIP Co	de Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Co.	
3. Full Name (Last, First, Middle Initial)	Outstanding:
o. I dii Ivaino (East, I iist, Wildele Illitta)	Name of Employer
Mailing Address	Occupation
City State ZIP Co.	Amount de Guaranteed
	Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Coopenion
	Amount
City State ZIP Co	de Guaranteed Outstanding:
<del></del>	<del></del>
	Control and the second or all all and the second or all all and the second or all and th
SUBTOTALS This Period This Page (optional)	
TOTALS This Period (last page in this line only)	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

# SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page of Schedule C

Federal Election Commission, Washington, D.C. 20463		rage or scriedate o		
NAME OF COMMITTEE (In Full)	ΙΔ	FEC IDENTIFICATION NUMBER		
LENDING INSTITUTION (LENDER)	Amous of Loan	Interest Rate (APR)		
Full Name	[pages] and the property of th	, , ,		
	المستعدد المستعدد المستعدد	0/		
Mailing Address		1987-2087 / \$10 4 5 1 / \$10 - 2 V 12		
	Date Incurred or Established			
City State Zip Code	Date Due	harmal lambarian		
A. Has loan been restructured? No Yes	If yes, date originally incurre	ed MM., Aproprior		
B. If line of credit,	Total			
Amount of this Draw:	Outstanding Balance:			
C. Are other parties secondarily liable for the debt	incurred? ors must be reported on Schedule C.	.)		
D. Are any of the following pledged as collateral for property, goods, negotiable instruments, certifical stocks, accounts receivable, cash on deposit, or	tes of deposit, chattel papers,	What is the value of this collateral?		
No Yes If yes, specify:		University and Same Super Company Committee Co		
The True in yes, speeny.	<del></del>	Does the lender have a perfected security		
		interest in it? No Yes		
E. Are any future contributions or future receipts of collateral for the loan? No Yes If	interest income, pledged as yes, specify:	What is the estimated value?		
A depository account must be established pursu to 11 CFR 100.82(e)(2) and 100.142(e)(2).	ant Location of account:			
Date account established:	Address:			
THE HIT I TOWN DOWN IN THE TOWN				
	City, State, Zip:			
F. If neither of the types of collateral described about the loan amount, state the basis upon which this	ve was pledged for this loan, or if the solution or if the solution was made and the basis on w	e amount pledged does not equal or exceed which it assures repayment.		
G. COMMITTEE TREASURER		DATE		
Typed Name				
Signature				
H. Attach a signed copy of the loan agreement.				
TO BE SIGNED BY THE LENDING INSTITUTION     To the best of this institution's knowledge,		rmation regarding the extension of the loan		
are accurate as stated above.  II. The loan was made on terms and condition similar extensions of credit to other borrow	ns (including interest rate) no more t	favorable at the time than those imposed for		
III. This institution is aware of the requirement complied with the requirements set forth at	that a loan must be made on a bas	sis which assures repayment, and has		
AUTHORIZED REPRESENTATIVE		DATE		
Typed Name		Man / 10-00 / 10-00 / 10-00		
Signature	Title			

SCHEDULE D	(FEC	Form	3X)
DEBTS AND	DBLIGA	TIONS	S

(Use separate schedule(s)

PAGE OF FOR LINE NUMBER:

Excluding Loans		numbered line)	(check only one)	10
NAME OF COMMITTEE (In Full)		_		
A Full Name // not Fivet Atiadia Initial) of	Debter or Creditor	Notice of D	Ocht (Purposo)	
A. Full Name (Last, First, Middle Initial) of	debitor of Creditor	Nature of L	Debt (Purpose):	
Mailing Address				
City State	Zip Code			
Outstanding Balance Beginning This Per	_ ;			
Amount Incurred This Period	Payment This Period		ng Balance at Close of المحالية	This Period
B. Full Name (Last, First, Middle Initial) of	Debtor or Creditor	Nature of E	Debt (Purpose):	
Mailing Address				
City State	Zip Code			
Outstanding Balance Beginning This Per Amount Incurred This Period	Payment This Period		ng Balance at Close of	
C. Full Name (Last, First, Middle Initial) of	Debtor or Creditor	Nature of C	Debt (Purpose):	
Mailing Address				
City	State Zip Code			
Outstanding Balance Beginning This Per	iod		-	
Amount Incurred This Period	Payment This Period		ng Balance at Close of	
La vien il can care	وم يتميدون فلتنجيح للم للمسلم الأست	muli li a e	-01-20-20-20-20-20-20-20-20-20-20-20-20-20-	
1) SUBTOTALS This Period This Page (option	onal)	7*3.4.2. • • • • • • • • • • • • • • • • • • •	e Togy ( ) ji sangi keluangan sejihangi Sejihangan ( ) ji sangi kelangan sejihangan sejihangan sejihangan Sangi kelangan ( ) nangi sangi kelangan sejihan sejihan sejihan	
2) TOTALS This Period (last page this line r	number only)		A LANGUAGE CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR C A CONTRACTOR CONTRA	
3) TOTAL OUTSTANDING LOANS from Sch	nedule C (last page only)	······ }	en 17 beginnen Same Franch (* 1800) Marie Same Same Same Same Same Same Same Sam	-
4) ADD 2) and 3) and carry forward to appre	opriate line of Summary Page (last page	e only) ▶ 🙏	285 B B 461 B A	!

## SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

ITEMIZED INDEPENDENT EXPENDITURES	PAGE OF FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Check if 24-hour report 48-hour report New report Amends report filed or	TO T
Full Name of Payee	Date of Public Distribution/Dissemination
Mailing Address	Amount
City State Zip C e	Date of Dishumoment or Obligation
Purpose of Expenditure  Category/ Type	Date of Disbursement or Obligation
Name of Federal Candidate  Support Office S Oppose P	Sought: House District:
Calendar Year-To-Date Per Election for Office Sought  Disburse	ement For:
Full Name of Payee	Date of Public Distribution/Dissemination
Mailing Address	Amount
City State Zip Code	200 ( ) Old and a Old a disc
Purpose of Expenditure  Category/ Type	Date of Disbursement or Obligation
Name of Federal Candidate  Support Office S Oppose	Sought: House District:
Calendar Year-To-Date Per Election for Office Sought  Disburs	ement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	
(b) SUBTOTAL of Uniternized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Signature Date	7 / 6 7 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7

# SCHEDULE F (FEC Form 3X) ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)

OF	PAGE		ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  (To be used only by Political Committees in the General Election)  NAME OF COMMITTEE (In Full)				
	FOR LINE 25 (	eneral Election) F					
ck if our notice	Check 24-ho						
		ee	bardin te Canadite	II Name of Jubo		mittee been designated to ma penditures by a political party NO	•
			47	ailing Addre s	_	the designating committee:	YES, name the d
Code	te ZIP Co	State		У	Cit		
Category	nditure	Purpose of Expend			Each Payee	(Last, First, Middle Initial) of	Full Name (Las
Туре		Date				dress	Mailing Address
γ- <b>γ-</b> γ-γ-γ-	)		e	Zip Code	State		City
		_ Amount	State: District:	House Senate Presidential	Office Sought:	ederal Candidate Supported	Name of Federa
	<u> </u>			rresidential		General Election e for this Candidate ▶	
Category	nditure	Purpose of Expend			Each Payee	(Last, First, Middle Initial) of	Full Name (Las
Туре		Date				dress	Mailing Address
7 <b>7 7</b> 7	/ Y • Y		e	Zip Code	State		City
		_ Amount	State: District:	House Senate Presidential	Office Sought:	ederal Candidate Supported	Name of Federa
		7-2-2				General Election e for this Candidate ▶	
Category	enditure	Purpose of Expend			Each Payee	(Last, First, Middle Initial) of	Full Name (Las
Туре		Date	· · · · · · · · · · · · · · · · · · ·			dress	Mailing Address
V 2 V 2 V	/ TO / TO Y	Man / D	e	Zip Code	State		City
		- Amount	State:	House Senate Presidential	Office Sought:	ederal Candidate Supported	Name of Federa
	<u> </u>	5				General Election e for this Candidate ▶	
			<del></del>				Expenditure for

RECEIVED FEC MAIL CENTER

2015 FEB 10 PM 12: 26

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Federal Election Comm 20463 Washington, DC aga E

98020

# Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered

Hand Delivered	Date of Receipt
USPS First Class Mail  Postmarked  1/28/16	Date of Receipt 2/10/16
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	. , .
Overnight Delivery Service (Specify):	Shipping Date ext Business Day Delivery
Received from House Records & Registration	Date of Receipt Office
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
PREPARER	2/10/16 DATE PREPARED
(3/2015)	